CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Please type or print in ink.

RECEIVED STATEMENT OF ESONOMIC INTEREST, ECEIVED

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Date Received

NAME OF FILER (LAST) BRADLEY VINCENT **MITZELFELT** 1. Office, Agency, or Court Agency Name San Bernardino County Board of Supervisors Division, Board, Department, District, if applicable Your Position First District Vice-Chairman, Board of Supervisors ▶ If filing for multiple positions, list below or on an attachment. See attached list 2. Jurisdiction of Office (Check at least one box) X State ☐ Judge or Court Commissioner (Statewide Jurisdiction) Multi-County _____ City of ___ Other _ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through Leaving Office: Date Left ____/___ December 31, 2011. (Check one), -or-The period covered is _______, through O The period covered is January 1, 2011, through the date of leaving office. December 31, 2011. O The period covered is _______ through Assuming Office: Date assumed ____/___ the date of leaving office. Candidate: Election Year _____ Office sought, if different than Part 1: __ 4. Schedule Summary ► Total number of pages including this cover page: ___ Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule herein and in any attached schedules is true and complete. I acknowledge this is a I certify under penalty of perjury under the laws of the State of California that Signature Date Signed _

Bradley V. Mitzelfelt California Form 700 – Statement of Economic Interests Attachment for Multiple Agencies and Positions Held

| Multi-County San Bernardino and Los Angeles Counties | | |
|--|----------------------------|--|
| Name of Agency | Position Held | |
| High Desert Corridor Joint Powers Authority | Chairman, Board | |
| | | |
| Multi-County San Bernardino and Riverside Counties | | |
| Name of Agency | Position Held | |
| Inland Empire Health Plan | Member, Board of Directors | |
| Inland Empire Health Plan Health Access | Member, Board of Directors | |
| Mojave Desert Air Quality Management District | Member, Board | |
| Inland Empire Economic Recovery Corporation | Member, Board of Directors | |
| | | |
| Multi-County | | |
| CALAFCO | Member, Board of Directors | |
| | | |
| San Bernardino County | | |
| Name of Agency | Position Held | |
| Local Agency Formation Commission | Commissioner | |
| Mojave Desert and Mountain Recycling J.P.A. | Member, Board | |
| Morongo Basin Transit Authority | Member, Board | |
| Omnitrans | Member, Board | |
| San Bernardino Associated Governments | Member, Board of Directors | |
| | | |
| Victor Valley Economic Development Authority | Chairman, Board | |
| Victor Valley Transit Authority | Member, Board | |
| Victor Valley Wastewater Reclamation Authority | Member, Board | |
| Indian Gaming Local Benefit Committee | Member, Board | |
| | | |
| Multi-State California-Arizona-Nevada-Utah | | |
| Name of Agency | Position Held | |
| Quad State Local Governments Authority J.P.A. | Member, Board | |

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| BRADLEY V. METZELFELT |

| NAME OF BUODISO CUTTO | NAME OF DUCINESS ENTITY |
|--|--|
| NAME OF BUSINESS ENTITY Kimbersky Clark Corporation | NAME OF BUSINESS ENTITY |
| Kimberely-Clark Corporation GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| Investment | |
| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| ▼ \$2,000 - \$10,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT Stock Other | NATURE OF INVESTMENT Stock Other |
| (Describe) | (Describe) |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| / <u>/ 11 </u> | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| | |
| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | <u>\$2,000 - \$10,000</u> \$10,001 - \$100,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other | Stock Other |
| (Describe) | (Describe) |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| O monte Received of \$500 of Minite (Report on Schedule C) | O Income Necested of \$300 of Wildle (Report of Scriedile C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
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| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| AOGOINED BIOLOGED | NOGORICED SIGN COLED |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
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| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | \$2,000 - \$10,000 \ \ \ \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 Over \$1,000,000 | \$100,001 - \$1,000,000 Over \$1,000,000 |
| | |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other | Stock Other |
| (Describe) | (Describe) |
| Partnership O Income Received of \$0 - \$499 | Partnership O Income Received of \$0 - \$499 |
| O Income Received of \$500 or More (Report on Schedule C) | Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| <u> </u> | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
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| | |

Comments:

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

BRADLEY V. MITZELFELT

| ► NAME OF SOURCE | NAME OF SOURCE |
|--|--|
| Young Homes - Reggie King | MolyCorp |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 10370 Trademark Street, Rancho Cucamonga, CA | 5619 Dtc Parkway, Greenwood Village, CO |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | League of CA Cities CITIPAC |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 04 / 14 / 11 s 60 Concert Tickets | 04 <u>j</u> 29 <u>j</u> 11 _{\$} 100 Dinner Gala |
| 06 / 17 / 11 s 250 Concert Tickets | \$\$ |
| 06 / 17 / 11 s 50 Dinner | \$ |
| ► NAME OF SOURCE | ► NAME OF SOURCE |
| Nolte & Associates | California Speedway |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 15431 Anacapa Road, Victorville, CA | 9300 Cherry Avenue, Fontana, CA |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 07 / 04 / 11 s 99.96 Sports Tickets | 12 / 19 / 11 s 50 Bottle of Wine |
| \$ | \$ |
| | |
| ► NAME OF SOURCE | ► NAME OF SOURCE |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| \$ | |
| | \$ |
| | \$ |
| | |
| Comments: | |
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